

STATEMENT OF ECONOMIC INTERESTS
DEPT. OF FINANCE
PERSONNELDate Received
Official Use Only

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A Public Document

Please type or print in ink.

| | | | |
|--|---------|----------|---|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAYTIME TELEPHONE NUMBER |
| Wilkening | Michael | Richard | |
| MAILING ADDRESS (May use business address) | STREET | CITY | STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS |
| | | | |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Department of Finance

Division, Board, District, if applicable:

Health and Human Services

Your Position:

Program Budget Manager

☒ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: VariousPosition: Designee

2. Jurisdiction of Office (Check at least one box)

☒ State☐ County of _____☐ City of _____☐ Multi-County _____☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial Date: ____/____/____☒ Annual: The period covered is January 1, 2007, through December 31, 2007.

-or-

☐ The period covered is ____/____/____, through December 31, 2007.☐ Leaving Office Date Left: ____/____/____
(Check one)☐ The period covered is January 1, 2007, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.☐ Candidate

4. Schedule Summary

☒ Total number of pages including this cover page: 1

☒ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
*Investments (Less than 10% Ownership)*Schedule A-2 ☐ Yes - schedule attached
*Investments (10% or greater Ownership)*Schedule B ☐ Yes - schedule attached
*Real Property*Schedule C ☐ Yes - schedule attached
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*Schedule D ☐ Yes - schedule attached
*Income - Gifts*Schedule E ☐ Yes - schedule attached
Income - Travel Payments

-or-

☒ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.